

Instructions

Use this form to register to vote or update your current registration.

Print all information clearly using black or blue pen. Mail this completed form to your county elections office (address on back)

Deadline

This registration will be in effect for the next election if postmarked no later than the Monday four weeks before Election Day

Voting

You will receive your ballot in the mail. Contact your county elections office for accessible voting options.

Public Information

Your name, address, gender, and date of birth will be public information

Notice

Knowingly providing false information about yourself or your qualifications for voter registration is a class C felony punishable by imprisonment for up to 5 years, a fine of up to \$10,000, or

Public Benefits Offices

If you received this form from a public benefits office, where you received the form will remain confidential and will be used for voter registration purposes only.

Registering or declining to register will not affect the assistance provided to you by any public benefits office. If you decline to register, your decision will remain confidential.

If you believe someone interfered with your right to register, or your right to privacy in deciding whether to register, you may file a complaint with the Washington State Elections Division.

Contact Information

If you would like help with this form, contact the Washington State Elections Division.

web www.vote.wa.gov (800) 448-4881 email elections@sos.wa.gov

For official use	3		
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Fold and seal, or use an envelope

Washington State Voter Registration Form

Register online at www.myvote.wa.gov

last name	first	mid	middle	
			☐ female	
date of birth (mm / c	ld / yyyy)			
residential address	in Washington	apt	#	
city		ZIP		
mailing address, if d	lifferent			
city		state	state and ZIP	
phone number (opti	onal) email address	(optional)		
Qualifications	not complete this form.	-		
☐ Yes ☐ No	l am a citizen of the		erica	
☐ Yes ☐ No	I will be at least 18 y			
	as Status	out out by the her	a cicodon.	
☐ Yes ☐ No I	am currently serving ncludes National Guard and spouses or depende	and Reserves,	due to servi	
	live outside the United	-		
Identification – V	Vashington Driver Li	censes. Permit.	or ID	
*	Washington driver D, you may use the last ocial Security number	x x x - x x -		
Change of Name o	r Address			
	be used to update your	current registration,	if applicable	
former last name	first	midd	le	
Former residential a	ddress city	stata	and ZIP	

6. Declaration

I declare that the facts on this voter registration form are true. I am a citizen of the United State, I will have lived at this address in Washington for at least thirty days immediately before the next election at which I vote, I will be at least 18 years old when I vote, I am not disqualified from voting due to a court

order, and I am not un	ler Department of Corrections supervision for a	
Washington felony cor	viction.	
sign	date	
here	here	

